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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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COVER LETTER

			V BIC BETTER	
TO:	Registration Division of C	Section Corporations		
SUBJI	ECT: <u>Davis</u> L	Hauling LLC Name of Li	mited Liability Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this n	natter to the following:	
	<u>Terry Da</u>	vis		
			Name of Person	
			Firm/Company	
	34848 BI	anton Rd		
			Address	
	Dade Cit	y, FL 33523	2: /2	
			City/State and Zip Code	
_td	avis19671@v	ahoo.com E-mail address: (to be use	d for future annual report notifies	ation)
For fur	ther informatio	n concerning this matter, ple	·	·
Terry		at (at (at (813) 365-0539 Area Code Daytime Te	lephone Number
Enclos	ed is a check fo	r the following amount:		
□ \$125.0	0 Filing Fee	✓S130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address Registration Section Division of Corporations P.O. Box 6327

Street/Courier Address Registration Section

Division of Corporations Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Davis Hauling LLC (Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal officers.	
Principal Office Address:	Mailing Address:
34848 Blanton Rd Dade City, FL 33523	34848 Blanton Rd Dade City, FL 33523
ARTICLE III - Registered Agent, Registered Office, & The Limited Liability Company cannot serve as its own Remother business entity with an active Florida registration.) The name and the Florida street address of the registered agents.	egistered Agent. You must designate an individual or
Terry Davis	9-11- 11
Name	
34848 Blanton Rd Florida street address (P.O. Box N	OT acceptable)
Dade City City	Ft. 33523 Zip
the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obligation.	ce of process for the above stated limited liability company at be appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	<u>Terry Davis</u> 34848 Blanton Rd
	Dade City, FL 33523
AMBR	Maria L. Navis
	34848 Blanton Rd.
	Dade City, FL 33523
	-
(Use attachment if necessary) Æ V: Effective date, if other than the fective date is listed, the date must	he date of filing:
EV: Effective date, if other than tective date is listed, the date mus of filing.)	he date of filing:
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)